03-21-06

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			Application Number	10/797,69	92		
TRANSMITTAL FORM be used for all correspondence after initial filing)			Filing Date	March 9,	2004		
			First Named Inventor	Brian M.	May et al.		
			Art Unit	3738			
		Ī	Examiner Name	Bruce E.	Snow		
Total Number of Pages in	This Submission		Attorney Docket Number	5490-000	0031/CPG		
		ENCLO	SURES (check all that apply))			
Fee Transmittal Form	Allowance Communication to ology Center (TC)						
Fee Attached		Licensir	ng-related Papers	☐ Appea	Appeal Communication to Board of Appeals and Interferences		
Amendment / Reply		Petition		☐ Appea	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After Final		Petition to Convert to a Provisional Application		☐ Proprie	Proprietary Information		
. Affidavits/declarat	lion(s)	Power of Attorney, Revocation Change of Correspondence Address		☐ Status	Status Letter		
Extension of Time Re	quest	Terminal Disclaimer			Other Enclosure(s) (please identify below):		
		Reques	at for Refund	НД	P Form 1449; Five (5) Foreign		
Express Abandonment Request		CD, Number of CD(s)		Otl	tent Documents; One (1) her Document; Return stcard		
Information Disclosure Statement					StCd1 U		
Certified Copy of Priority Document(s)			ks				
Response to Missing Parts/ Incomplete Application							
Response to Missing Parts under 37 CFR 1.52 or 1.53							
	SIGNAT	URE OF A	APPLICANT, ATTORNEY,	OR AGENT			
Firm or Harness, Dickey & Pierce, P.L.0			Attorney Name Reg. No.				
Signature	pela	1, 4					
Date Ma	arch 20, 2006						
	ÇE	RTIFICAT	E OF TRANSMISSION/MA	ILING			
	ostage as first cla	lass mail in			with the United States Postal for Patents, P.O. Box 1450,		
Typed or printed name	Richard W. Wa			Express Mail Label No.	EV 853 855 860 US (3/20/2006)		

Signature

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Date

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07	Fees pursuant to the Consolidated Appropriate FEE TRANS for FY Applicant claims small entity s	SMITTAL 2006	Application Number Filing Date First Named Inventor Examiner Name Art Unit	Complete if Known 10/797,692 March 9, 2004 Brian M. May et al. Bruce E. Snow 3738	
	TOTAL AMOUNT OF PAYMENT	(\$) 180	Attorney Docket No.	5490-000031/CPG	
	METHOD OF PAYMENT (check	all that apply)	-		
	☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): ☐ Deposit Account Number: 08-0750 ☐ Deposit Account Number: 08-0750				

М	METHOD OF PAYMENT (check all that apply)								
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	Deposit Account Deposit Account Number: 08-0750 Deposit Account Name: Harness, Dickey & Pierce, PLC								
_	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
	Charge fe	e(s) indicate	ed below		☐ Charç	ge fee(s) indicate	ed below, except	t for the filing fee	
	Charge ar	v additional	I fee(s) or unde	erpayments of fe	e(s) X Credif	t any overpayme	ents	-	
	Under 37	CFR 1.16 a	and 1.17						
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FE	EE CALCULATION								
1.	BASIC FILING, SEA	ARCH, AN	D EXAMINA	TION FEES					
		FILING F	FEES	SEAF	RCH FEES		IATION FEES		
	Application Type	Fee (\$)	Small Entity Fee(\$)	⊻ <u>Fee(</u> \$	Small Entity Fee(\$)	(<u>Fee(\$)</u>	Small Entity Fee(\$)	Fees Paid (\$)	
	Utility Utility	300	150	500	250	<u>ree(\$)</u> 200	100	rees raid (4)	
	Design	200	100	100	50	130	65	**************************************	
	Plant	200	100	300	150	160	80		
	Reissue	300	150	500	250	600	300		
	Provisional	200	100	0	0	0	0		
2.	EXCESS CLAIM FE	.ES						Small Entity	
	Fee Description						<u>Fee (\$)</u>	Fee (\$)	
	Each claim over 20 (inc						50	25	
	Each independent claim Multiple dependent claim		cluding Reissu	es)			200 360	100 180	
	Total Claims	Extra C	Claims F	Fee(\$)	Fee Paid (\$)			Dependent Claims	
	20 or HP=		x _	=======================================	0		Fee (\$)		
	HP = highest number of t	total claims pr	aid for, if greater	than 20.					
	Indep. Claims	Extra C	<u> Claims</u> <u>F</u>	Fee(\$)	Fee Paid (\$)				
	3 or HP=	_	Х _	=	<u>0</u>				
	HP = highest number of i		claims paid for, if	greater than 3.					
	APPLICATION SIZE		1 100 -1 - 4	C (1		~1 ·1			
į	If the specification and di				luding electronically ie is \$250 (\$125 for s			50	
	sheets or fraction	thereof. Se	ee 35 U.S.C. 41	1(a)(1)(G) and 3	37 CFR 1.16(s).			30	
	Total Sheets	Extra Sh	<u>neets</u> <u>Nun</u>	mber of each	additional 50 or f		of <u>Fee (\$)</u>	Fee Paid (\$)	
	-	= 0	/ 50 =	0 (round	d up to a whole nu	mber) x		= <u>0</u>	
4.	OTHER FEE(S)							Fees Paid (\$)	
	Non-English Spec		-	-	ount)				
	Other (e.g., late f	iling surcha	arge): Submiss	ion of IDS				<u>180.00</u>	

SUBMITTED BY					
Signature	plan, was	Registration No. (Attorney/Agent)	38,043	Telephone	248.641.1600
Name (Print/Type)	Richard W. Warner			Date	March 20, 2006

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